



City of Dublin

Case # \_\_\_\_\_ - \_\_\_\_\_

## APPLICATION FOR DEVELOPMENT

### PLEASE CHECK THE TYPE OF REVIEW

- ☐ West Innovation Districts  
(Zoning Code Sections 153.037 - 153.043)
- ☐ Bridge Street Corridor Districts  
(Zoning Code Sections 153.057- 153.066)
- ☐ Wireless Communication Facility (Chapter 99)

### PLEASE CHECK THE APPLICATION TYPE

- ☐ Basic Plan Review
- ☐ Development Plan Review
- ☐ Waiver Review
- ☐ Open Space Fee-in-Lieu
- ☐ City Council Appeal
- ☐ Minor Project
- ☐ Site Plan Review
- ☐ Master Sign Plan
- ☐ Parking Plan
- ☐ Administrative Departure

#### Wireless Applications

- ☐ New Tower
- ☐ Co-Location
- ☐ Alternative Structure
- ☐ Temporary

The following applications require review and decision by the **Planning and Zoning Commission, Board of Zoning Appeals, or Architectural Review Board**, but may be submitted concurrently with another application.

Check any that apply:

- ☐ Conditional Use
- ☐ Administrative Appeal
- ☐ Project involving modifications to property within the Architectural Review District
- ☐ Other: \_\_\_\_\_
- ☐ Rezoning

### SUBMISSION REQUIREMENTS

- ☐ **Fee** (refer to the approved fees list)
- ☐ **Electronic Copies** of all application materials (PDF, JPEG, Word, etc. as appropriate)
- ☐ **Submission Requirements** for each type of application (refer to checklists)
- ☐ **Legal Description and/or Property Survey** for the subject property

**I. PROPERTY INFORMATION:** Provide information to identify properties and the proposed development. Attach additional sheets if necessary.

Property Address(es): <b>82 S. High Street</b>	
Tax ID/Parcel Number(s): <b>273-000105-00</b>	Parcel Size(s) in Acres: <b>.126</b>
Existing Land Use/Development: <b>471 Dwelling As RETAIL</b>	Zoning District:

☐ Check this box if any **Administrative Departures** are requested and attach an Administrative Departure request form.

☐ Check this box if any **Waivers** are requested as part of the application for development and attach a Waiver Request form.

**II. PROPERTY OWNER INFORMATION:** Indicate the person(s) or organization(s) who own the property proposed for development. Attach additional pages if there are multiple property owners.

Name (Individual or Organization): <b>Robert : ZOA Schisler</b>	
Mailing Address: <b>258 Monterey Dr. Dublin Ohio 43017</b>	
Daytime Telephone: <b>614-915-4289</b>	Fax: <b>614-646-0588</b>
Email or Alternate Contact Information: <b>bob.schisler@urs.com</b>	

### FOR OFFICE USE ONLY: DIRECTOR'S ACCEPTANCE

Date of Acceptance:	Next Decision Due Date:
Final Date of Decision:	Determination:
Director's (or Designee's) Signature:	

**FILE COPY**  
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13-048 ARB-MAP

**III. APPLICANT(S):** Indicate person(s) submitting the application if different than the property owner(s).

Name: (Individual or Organization) <u>Robert D. Schisler</u>	
Mailing Address: <u>258 MONTEREY DR. DUBLIN OH 43017</u>	
Daytime Telephone: <u>614-464-4500</u>	Fax: <u>614-464-0588</u>
Email or Alternate Contact Information: <u>bob.schisler@urs.com</u>	

**IV. AUTHORIZED REPRESENTATIVE(S):** Indicate the person(s) authorized to represent the property owner and/or applicants.

Name: (Individual or Organization) <u>Rebecca Schisler</u>	
Mailing Address:	
Daytime Telephone: <u>614-889-6303</u>	Fax:
Email or Alternate Contact Information: <u>bbooties@sbcglobal.net</u>	

**V. AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVE(S):** Complete if applicable.

I, <u>Robert Schisler</u> , the <b>owner</b> , hereby authorize <u>Rebecca Schisler</u> to act as a <b>representative(s)</b> in all matters pertaining to the processing and approval of this application, including modifying the application. I agree to be bound by all representations and agreements made by the designated representative.	
Signature of Current Property Owner: <u>Robert D. Schisler</u>	Date: <u>7/5/2013</u>

☐ Check this box if the original Authorization for Owner's Applicant(s)/Representative(s) is attached as a separate document.

**VI. AUTHORIZATION TO VISIT THE PROPERTY:** Site visits to the property by City representatives are essential to process this application. The Owner/Applicant, as noted below, hereby authorizes City representatives to enter, photograph and post a notice on the property described in this application. This is optional, but recommended.

I, <u>Robert D. Schisler</u> , the <b>owner</b> or <b>authorized representative</b> , hereby authorize City representatives to enter, photograph and/or post a notice on the property described in this application.	
Signature of Owner or Authorized Representative: <u>Robert D. Schisler</u>	Date: <u>7/5/2013</u>

**VII. APPLICANT'S AFFIDAVIT:** This section must be completed and notarized.

I, <u>Robert D. Schisler</u> , the <b>owner</b> or <b>authorized representative</b> , have read and understand the contents of this application. The information contained in this application, attached exhibits and other information submitted, is complete and in all respects true and correct, to the best of my knowledge and belief.	
Signature of Current Property Owner or Authorized Representative: <u>Robert D. Schisler</u>	Date: <u>7/5/2013</u>

☐ Check this box if the Applicant's Affidavit and Acknowledgement is attached as a separate document.

Subscribed and sworn to before me this 5 day of July  
 State of Ohio  
 County of Franklin

{Notary Public

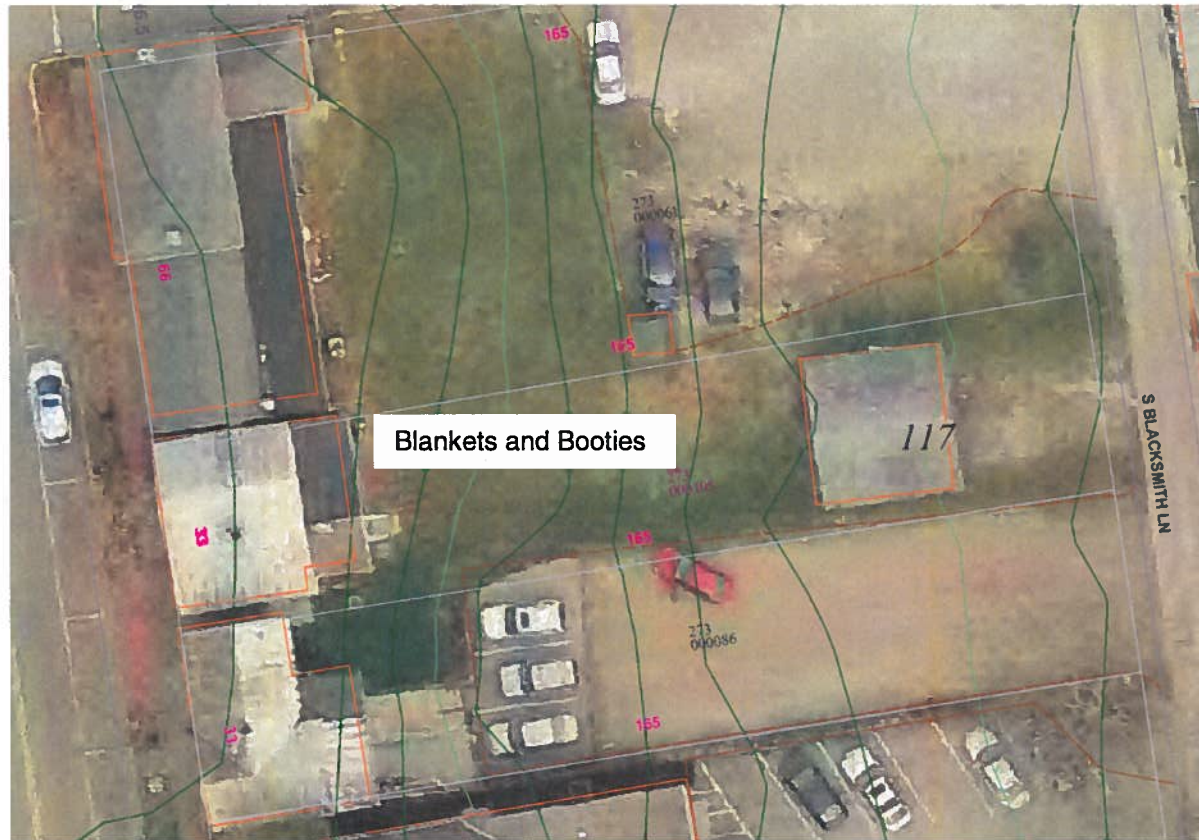


**ELIZABETH A FARLEY**  
 Notary Public, State of Ohio  
 My Commission Expires 06-07-16



Blankets and Booties Store  
82 South High Street  
Dublin, Ohio 43017

New Roof Project



Roof square footage = 896 SF.

**FILE COPY**

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13-068 APP-MPR  
JUL 05 2013

CITY OF DUBLIN  
PLANNING

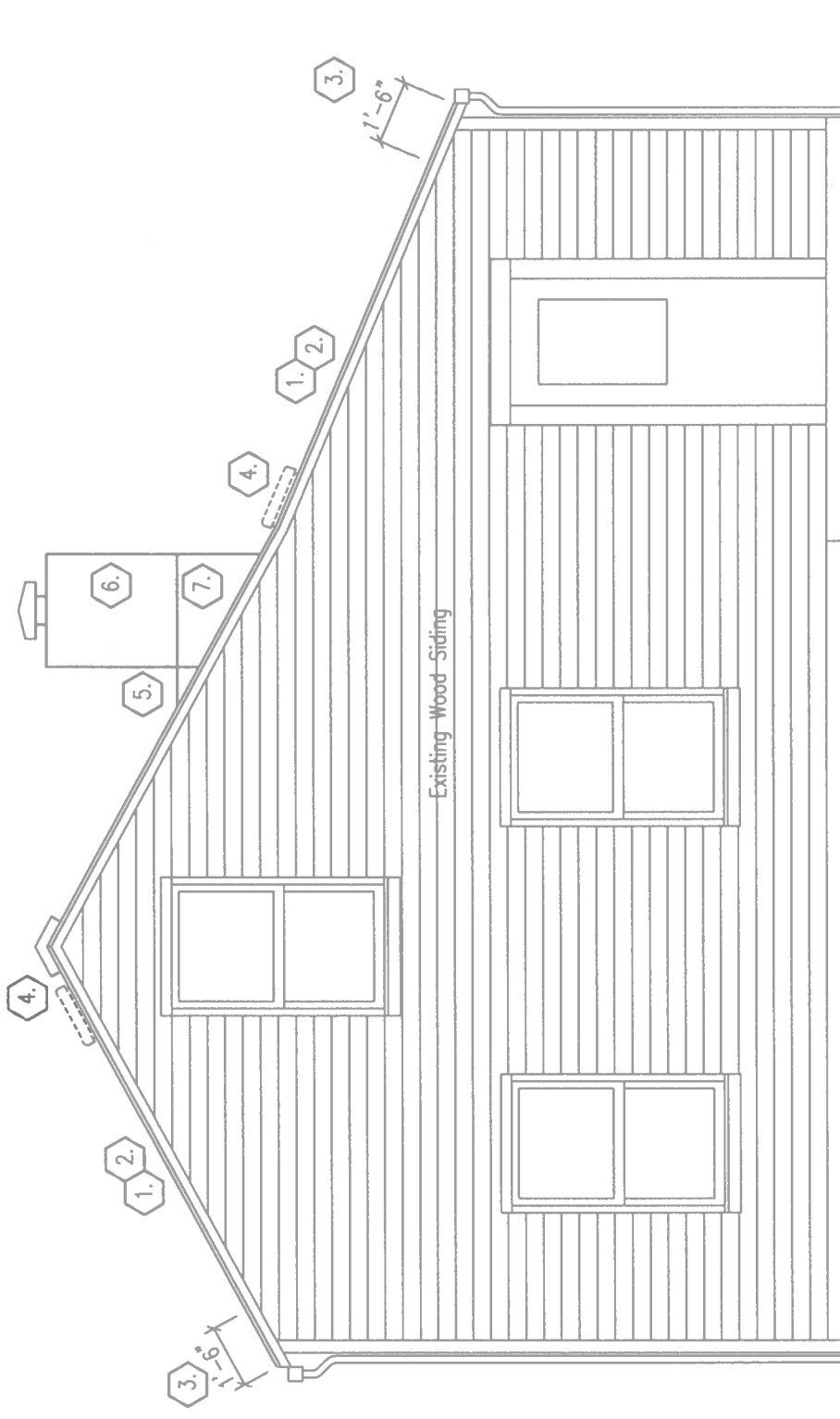


**Scope of Work:**

1. Remove existing standing seam tin roof.
2. Replace or repair roof rafters as needed.
3. Provide new plywood roof sheathing.
4. Apply stucco over chimney for water tight seal.
5. Install new aluminum flashing (white) at base of chimney.
6. Build a cricket behind the chimney to provide positive drainage.
7. Install new dimensional asphalt shingles over 15# felt paper.
8. Install new ridge vent and soffit vents.
9. Install aluminum drip edge (white) along roof perimeter.
10. Remove existing shingle roof on existing addition. Install new asphalt shingle roof.

# NOTES

1. Remove existing standing seam metal roof. Install new dimensional asphalt shingle roof over 15# felt paper.
2. Provide new  $\frac{1}{2}$ " plywood roof sheathing.
3. Provide 18" strip of ice guard along the gutter ends.
4. Remove existing roof vents. Install new ridge vent and soffit vents.
5. Provide cricket behind the chimney.
6. Install stucco on diamond mesh over brick chimney.
7. Install new aluminum flashing around base of chimney.
8. Provide new aluminum drip edge - white
9. Remove existing shingle roof. Install new dimensional asphalt shingle roof over 15# felt paper.



## WEST ELEVATION - FRONT

Sheet:

A-1

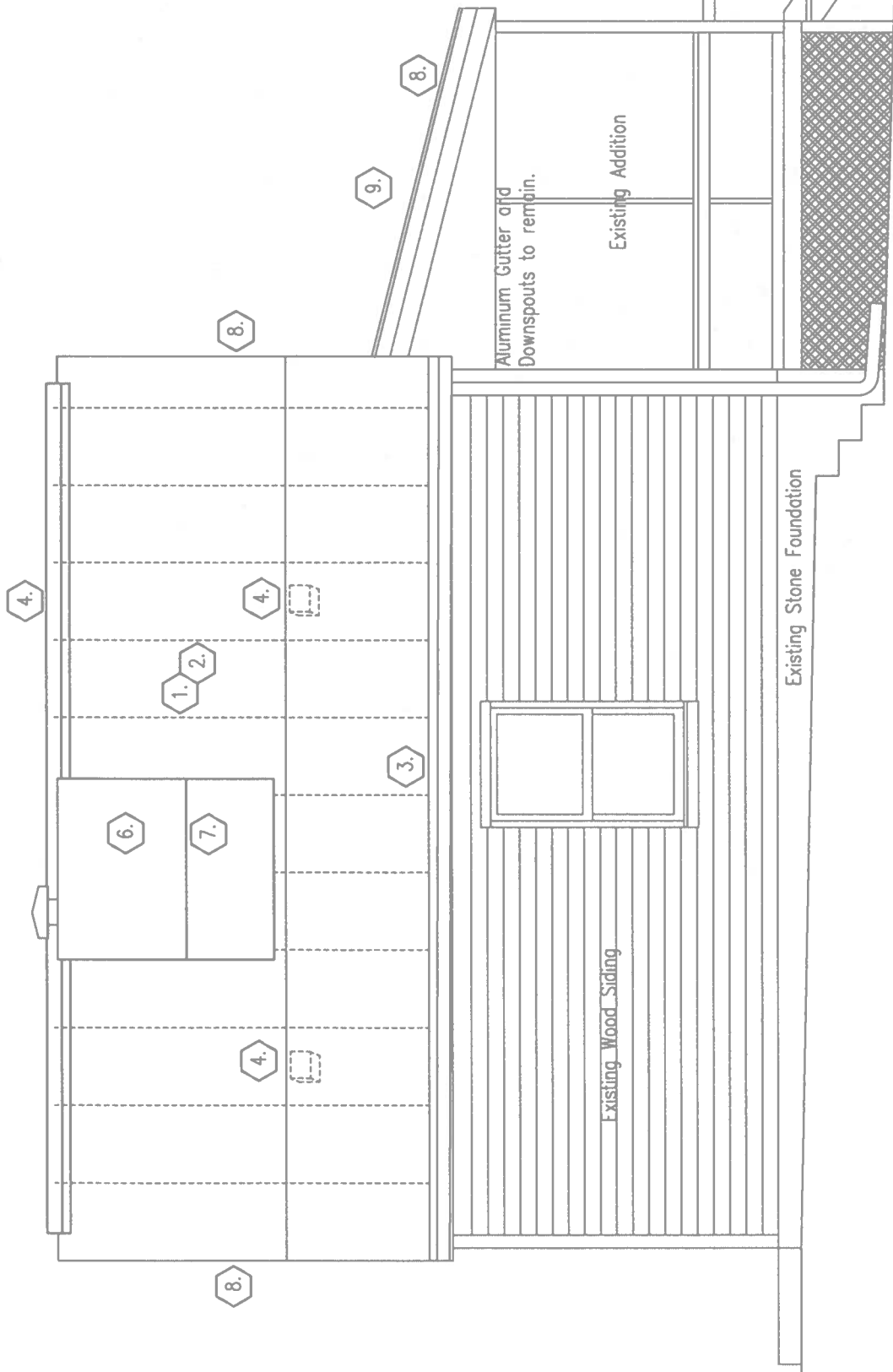
Date:  
July 5, 2013

Phone:  
Blankets and Booties  
614-889-6303

ADDRESS:  
Blankets and Booties  
82 South High Street  
Dublin, Ohio 43017

# NOTES

1. Remove existing standing seam metal roof. Install new dimensional asphalt shingle roof over 15# felt paper.
2. Provide new  $\frac{1}{2}$ " plywood roof sheathing.
3. Provide 18" strip of ice guard along the gutter ends.
4. Remove existing roof vents. Install new ridge vent and soffit vents.
5. Provide cricket behind the chimney.
6. Install stucco on diamond mesh over brick chimney.
7. Install new aluminum flashing around base of chimney.
8. Provide new aluminum drip edge - white
9. Remove existing shingle roof. Install new dimensional asphalt shingle roof over 15# felt paper.



## SOUTH ELEVATION - SIDE PHASE 1

ADDRESS:  
Blankets and Booties  
82 South High Street  
Dublin, Ohio 43017

Phone:  
Blankets and Booties  
614-889-6303

Date:  
July 5, 2013

Sheet:

A-2